

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | E.H. | | |
| O.I.P.E. CLASSIFIER | | 32 | 5/ |
| FORMALITY REVIEW | A.S. | 866 | 05-11-01 |
| RESPONSE FORMALITY REVIEW | J.K. | 835 | 07/26/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|-------|---------|
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

Rev
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7-26-01

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